## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a page of the public of the public

maintenance fee notification	1s.	in Block 1, by (a)	specifying a nev	v correspondence address	s, and/or (b) mulcaung a sep	parate "FEE ADDRESS" for	
CURRENT CORRESPONDENC	E ADDRESS (Note: Use Block 1 for	any change of address)	E	Fee(s) Transmittal. The papers, Each additions	mailing can only be used fair certificate cannot be used all paper, such as an assignme of mailing or transmission.	for any other accompanying	
27896 75	90 06/16/2006	/	~ <b>&amp;</b> \	_			
1901 RESEARCH SUITE 400		AUG O	7. J006	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
ROCKVILLE, MD	20850	W & PHAI	EMP			(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED		ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/717,852	11/19/2003		Neil R. Diener		COGNIO 109US	1708	
TITLE OF INVENTION: SI	ERVER AND MULTIPLE S	ENSOR SYSTEM I	FOR MONITORI	NG ACTIVITY IN A SH	ARED RADIO FREQUENC	Y BAND	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	;	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
	YES	\$700		\$300	<u> </u>		
				****	\$1000	09/18/2006	
EXAMINER ART U				CLASS-SUBCLASS	J		
CUMMING,		2617		455-456100			
. Change of correspondence 1.363).	e address or indication of "Fe	ee Address" (37		on the patent front page, li	. Edel.	l, Shapiro &	
Change of correspondence address (or Change of Correspondence dress form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
"Fee Address" indicat	ion (or "Fee Address" Indica or more recent) attached. Use	tion form	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON TH	IE PATENT (pri	nt or type)			
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be	low, no assignee da	ita will appear of	n the patent. If an assign	nee is identified below, the d	locument has been filed for	
(A) NAME OF ASSIGNE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Cognio, Inc	·		Germantown, Maryland				
lease check the appropriate	assignee category or categor	ries (will not be prin	ted on the patent)	: 🗖 Individual 🚨 Co	orporation or other private gr	oup entity Government	
a. The following fee(s) are	enclosed:	4b. <u>1</u>	Payment of Fee(s	):			
Issue Fee			A check in the amount of the fee(s) is enclosed.				
Publication Fee (No small entity discount permitted) Advance Order - # of Copies			Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to				
			Deposit Accou	nt Number <u>05-046</u>	(enclose an extr	a copy of this form).	
	(from status indicated above MALL ENTITY status. See 3	, _	b. Applicant is	no longer claiming SMA	LL ENTITY status. See 37 C	FR 1 27(a)(2)	
he Director of the USPTO i	is requested to apply the Issu	e Fee and Publication	n Fee (if any) or	to re-annly any previous	y paid issue fee to the applications or the storney or agent; or the	ation identified shove	
Authorized Signature	D. alda	Hour			006 MBEYENEZ 08880111	10717852	
Typed or printed name	D. Andrew Flo	oam		Registration N	34,597	300.00 OP 700.00 OP	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Typed or printed name D. Andrew Floam

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. **Applicant** Filed TC/A.U. Examiner Confirmation No

2617

Docket No. Customer No.

Title

10/717,852

Neil R. Diener et al. November 19, 2003

Cumming 1708

0370.0109C

27896

Server and Multiple Sensor System for Monitoring

Activity in a Shared Radio Frequency Band

## Mail Stop Issue Fee

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

## ISSUE FEE TRANSMITTAL

Transmitted herewith is an Issue Fee Transmittal (Form PTOL 85b) for the aboveidentified application.

	Also enclosed is:						
			Other:				
	Fees:						
		$\boxtimes$	Issue Fee of \$700.00 Other Fees: \$300.00 for publication fee.				
		Total fee: \$1,000.00					
Payment of Fees:							
		$\boxtimes$	Check No. <u>9846</u> in the amount of \$ <u>1,000</u> for the total fee is attached.				
			Please charge \$ to Deposit Account No. 05-0460 for the total fee. This paper is being submitted in duplicate.				
	$\boxtimes$	The Commissioner is hereby authorized to charge any additional fees that may be required, and to credit any overpayment, to Deposit Account No. 05-0460.					

Dated: August 2, 2006 EDELL, SHAPIRO & FINNAN, LLC **CUSTOMER No. 27896** 1901 Research Boulevard, Suite 400

Rockville, MD 20850 (301) 424-3640

Respectfully submitted by

EDELL, SAAPIRO & FINMAN, LLC

By:

D. Andrew Floam Reg. No. 34,597